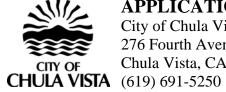
APPLICATION FOR REDUCED SEWER SERVICE CHARGE



City of Chula Vista | Finance Department 276 Fourth Avenue Chula Vista, CA 91910

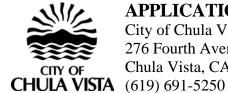
Please provide the following information.

If you have any questions regarding this application, please call (619) 691-5117 for assistance.

1. Name:				XXX-XX-		
	Last	First	MI	Last 4 SSN#		
2. Address:						
	Street		City	State	Zip Code	
. Home Phone:		Work	Work Phone:			
4. Indicate the	e water district you	r address is located in:				
Otay Water District Swee		Sweetwater Authori	etwater Authority		Cal-American	
5. Sewer Acc	ount Number:					
6. The number	er of members resid	ling in your household:				
7. Gross annu	al income for all m	nembers of your househo	old:			
CERTIFICAT	ΓΙΟΝ					
reduced sewer no longer be in	service charge, I ac effect.	stated herein change to the knowledge my responsib				
Name (<i>Please Pri</i>	int)					
Signature			Date			
		– For Office Use	Only –			
Reduced Rate (Circle One): A	approved	Denied			
Received by:			_ Received Da	te:		
Reviewed by:			_ Reviewed Da	ate:		
Approved by:			_ Approved Da	ate:		
Date processed	in Springbrook:	Date	emailed to Otay V	Vater District: _		
Date forwarded 900-06F	to Engineering:				June 2014	

June 2014

APPLICATION INSTRUCTIONS FOR REDUCED SEWER CHARGE



City of Chula Vista | Finance Department 276 Fourth Avenue Chula Vista, CA 91910 (619) 691-5250

YOUR APPLICATION WILL NOT BE PROCESSED WITHOUT THE FOLLOWING ITEMS:

- 1. Please complete the *Application for Reduced Sewer Service Charge* and return the completed application to the City of Chula Vista, Finance Department Sewer Billing. To determine your eligibility for this program, you must provide evidence of your reduced sewer service status (Chula Vista Municipal Code § 13.14.120).
- 2. Please provide a copy of the 2013 W-2 tax form for each household member.

OR

3. If you did not file a W-2 in 2013, please provide copies of check stubs indicating the total household income for 2013. Copies of check stubs should be provided for each household member.

OR

4. If you are receiving public assistance, an award letter from the Welfare Office must be provided along with a copy of a recent check.

OR

5. If you are receiving Social Security benefits, the 2013 Statement of Benefits of a copy of a recent check is acceptable. If you receive Social Security monies by direct deposit, a copy of a recent bank statement will satisfy this requirement.

If you have any questions regarding this application, please contact the Sewer Billing Division at (619) 691-5117 for assistance.

Applications, including all required documentation, may be submitted via mail, email, fax, or in person.

Mailed or in-person applications:

City of Chula Vista Finance Department 276 Fourth Avenue Chula Vista, CA 91910

Email applications to:

cvsewer@chulavistaca.gov

Fax applications to:

(619) 409-5814

900-06F June 2014